

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000111689

Entity Name: AWAKE TO HEALTH, INC

FILED  
Mar 09, 2009  
Secretary of State

## Current Principal Place of Business:

922 NORTHWEST 9TH PLACE  
CAPE CORAL, FL 33993

## New Principal Place of Business:

8282 BARTON FARMS BLVD  
SARASOTA, FL 34240

## Current Mailing Address:

922 NORTHWEST 9TH PLACE  
CAPE CORAL, FL 33993

## New Mailing Address:

8282 BARTON FARMS BLVD  
SARASOTA, FL 34240

FEI Number: 22-3942166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 CORAL WAY  
4TH FLOOR  
MIAMI, FL 33145 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: CAPO, EVELISSE  
Address: 922 NORTHWEST 9TH PLACE  
City-St-Zip: CAPE CORAL, FL 33993

Title: DVS ( ) Delete  
Name: HERNANDEZ, SIGFRIDO  
Address: 922 NORTHWEST 9TH PLACE  
City-St-Zip: CAPE CORAL, FL 33993

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: CAPO, EVELISSE  
Address: 8282 BARTON FARMS BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: DVS (X) Change ( ) Addition  
Name: HERNANDEZ, SIGFRIDO  
Address: 8282 BARTON FARMS BLVD  
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGFRIDO HERNANDEZ

DVS

03/09/2009

Electronic Signature of Signing Officer or Director

Date